

PLACE OF BIRTH

ARIZONA STATE BOARD OF HEALTH 28

1. County of Gila
 District of Globe
 Town of Globe
 or Globe
 City of Globe

BUREAU OF VITAL STATISTICS
ORIGINAL CERTIFICATE OF BIRTH

State Index No. _____
 County Registrar No. 144
 Local Registrar No. _____

2. Full name of child Bettie Lou Brock
 (If birth occurred in a hospital or institution, give its NAME instead of street and number)
 If child is not yet named, make supplemental report, as directed.

3. Sex of Child Female
 To be answered ONLY in event of plural births.
 4. Twin, triplet or other. _____
 5. No. in order of birth. _____
 6. Legitimate? yes
 7. Date of birth July 25, 1933
 Month day year

8. FATHER
 Full name Will Allen Brock
 9. Residence (Usual place of abode) Globe, Ariz.
 If nonresident, give place and state _____

10. Color or race White
 11. Age at last birthday 23 (Years)
 12. Birthplace (city or place) Bradley, Texas
 (State or country) _____

13. Occupation _____
 Nature of Industry _____

14. MOTHER
 Full maiden name Annie Laura
 15. Residence (Usual place of abode) Globe, Arizona
 If nonresident, give place and state _____

16. Color or race White
 17. Age at last birthday 18 (Years)
 18. Birthplace (city or place) Globe, Arizona
 (State or country) _____

19. Occupation _____
 Nature of Industry Housewife
 20. Number of children of this mother (a) Born alive and now living 10
 (Taken as of time of birth of child herein certified and including this child.) (b) Born alive but now dead 0
 (c) Stillborn _____

21. Were precautions taken against ophthalmia neonatorum? yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE
 I hereby certify that I attended the birth of this child, who was Born alive at 2:30 P. on the date above stated.
 (Born alive or stillborn.)
 *When there was no attending physician or midwife, then the father, householder, etc., should make this return. A stillborn child is one that neither breathes nor shows other evidences of life after birth.
 Signature H. E. Wightman, M.D.
 (Physician or midwife)
 Address Globe, Ariz.
 Given name added from _____
 1 supplemental report _____

Filed 8/7 1933 H. E. Wightman Local Registrar.
 Month, day, year. Filed 19 _____
 Registrar. 222-725-129 County Registrar.